· CLAIMS ONLY

Application Number	Filing Date
10/069184	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT									
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			/		/		51						
2				/	—		52						
3				/		/	53						
4				/		/	54						
5				/		/	55						
6				/	/	мми	56						
7				/		/	57						
8							58						
9							59						
10							60						
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39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep			1		2		Total Indep						
Total Depend			6		4		Total Depend						
Total Claims			7		6		Total Claims						